



PATENT CASE: CN01622

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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In re Application of: **Wu et al.**

For Patent: **Selective D1/DF Receptor
Antagonists for the Treatment
Of Obesity and CNS Disorder**

Serial No.: **10/649,495**

Filed: **08/27/2003**
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: Examiner: **To Be Assigned**

: Group Art Unit: **1625**

: Date: **March 16, 2004**
:

Schering-Plough Corporation
Kenilworth, New Jersey 07033

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
Mailstop: **OIPE**

SUBMISSION OF CORRECTED DECLARATION

Sir:

The is a request to re-submit the Declaration for Utility or Design Patent Application (37 CFR 1.63). Applicant's advise the original Declaration cites the Applicant(s), "Thavalakulam K. Sasikumar, Westfield, NJ". Please correct the Applicant(s) name to "**Thavalakulamgara K. Sasikumar, Westfield, NJ**".

No fee is believed to be due, however, if any fee is due the Commissioner is authorized to charge Deposit Account Number 19-0365 for any fees deemed necessary for consideration and entry of this corrected Declaration into the file record.

If there are any questions, the Office is invited to contact the undersigned.

Respectfully submitted,

William Lee
Reg. No. 46,100
Attorney for Applicant
(908) 298-2161

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, on March 16, 2004.

WILLIAM Y. LEE

Date of Signature



Please type a plus sign (+) inside this box



PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	CN01622
	First Named Inventor	Wen-Lian Wu et al.
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	08/27/2003
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SELECTIVE D1/D5 RECEPTOR ANTAGONISTS FOR THE TREATMENT OF OBESITY AND CNS DISORDERS

the specification of which
☒ is attached hereto
OR
☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/406,856	08/29/2002	

[Page 1 of 2]

Express Mail Label No.	EV 334447008 US
Date	08/27/2003

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☒ Customer Number 24265

OR

☐ Registered practitioner(s) name/registration number listed below

Place Customer
Number Bar Code
Label here

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.


Direct all correspondence to: ☒ Customer Number or Bar Code Label

24265

OR ☐ Correspondence address below

Name	William Y. Lee Reg. No. 46,100				
Address					
Address					
City		State		ZIP	
Country		Telephone	(908) 298-2161	Fax	(908) 298-5388

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname			
Wen-Lian		Wu			
Inventor's Signature				Date	12/4/03
Residence: City	Edison	State	NJ	Country	USA
				Citizenship	China
Post Office Address	5 Roney Road				
Post Office Address					
City	Edison	State	NJ	ZIP	08820
				Country	USA

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



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+

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>1</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Duane A.		Burnett	
Inventor's Signature <i>Duane A. Burnett</i>		Date <i>12/3/2003</i>	
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Given Name (first and middle (if any))		Family Name or Surname	
William J.		Greenlee	
Inventor's Signature <i>William J. Greenlee</i>		Date <i>1/14/04</i>	
Residence: City Teaneck	State NJ	Country USA	Citizenship USA
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Mailing Address			
City Teaneck	State NJ	ZIP 07666	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Thavalakulamgara K. Sasikumar		Sasikumar	
Inventor's Signature <i>[Signature]</i>		Date <i>12-03-03</i>	
Residence: City Westfield	State NJ	Country USA	Citizenship India
Mailing Address 128 East Grove Street, 2nd Floor			
Mailing Address			
City Westfield	State NJ	ZIP 07090	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.